COBRA RATES 2010

Monthly cost to continue healthcare through COBRA:

			Subsidized				Subsidized	
Single		SGL Rates		Family		Fam Rates		
\$	403.78	\$	141.32	\$	1,130.57	\$	395.70	
\$	367.61	\$	128.66	\$	1,029.28	\$	360.25	
¢	27.09	¢	9 48	¢	74.46	¢	26.06	
¢				i.		·	6.06	
	\$ \$ \$ \$	\$ 403.78	Single Solution \$ 403.78 \$ \$ 367.61 \$ \$ 27.09 \$	Single SGL Rates \$ 403.78 \$ 141.32 \$ 367.61 \$ 128.66 \$ 27.09 \$ 9.48	Single SGL Rates \$ 403.78 \$ 141.32 \$ \$ 367.61 \$ 128.66 \$ \$ 27.09 \$ 9.48 \$	Single SGL Rates Family \$ 403.78 \$ 141.32 \$ 1,130.57 \$ 367.61 \$ 128.66 \$ 1,029.28 \$ 27.09 \$ 9.48 \$ 74.46	Single SGL Rates Family Family \$ 403.78 \$ 141.32 \$ 1,130.57 \$ \$ 367.61 \$ 128.66 \$ 1,029.28 \$ \$ 27.09 \$ 9.48 \$ 74.46 \$	

Calculation:

Employee Premium X 2 % (COBRA Administration Fees X 2 (Bi-Weekly pay) = Monthly Rate

Eligibility:

Loss due to end of employment: Eligible for up to 18 months of coverage. Loss due to end of dependent status: Eligible for up to 36 months of coverage.

(Dependent status changes include: divorce, chg in student status, age, adoption, birth, marriage, etc).

Subsidized Rates: Subsidized Rates effective January 1, 2010.

Beginning March 1, 2009 COBRA rates can be subsidized by the IRS if termination of employment is <u>involuntary</u>. Eligible COBRA beneficiary must apply for the subsidy through the HR dept.

Dec 2009: COBRA subsidy program was extended, not to exceed a total of 15 months of coverage. Dec 2009: New qualification dates are involuntarily terminated on or before February 28,2010